## FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

PROCESSED August 3

OMB NUMBER: 3235-0076 August 31, 2008

OMB APPROVAL

SEP 182008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6) AND/OR** 

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY Date Received

Name of Offering ( check if this i Convertible Note Offering Filing Under (Check box(es) that apply	s an amendment and name has changed:  Rule 504 □ Rule 505		Section 4(6)	OE .
- · · · · · · · · · · · · · · · · · · ·	Amendment			
	A. BASIC IDENTIFICA	ATION DATA		
1. Enter the information requested about	it the issuer			( INDIVIDUAL CONTRACTOR OF THE PROPERTY OF THE
Name of Issuer (☐ Check if this is ar Terveta Inc.	amendment and name has changed, a	nd indicate change.)		
Address of Executive Offices 43 Nagog Park, Suite 201, Acton, MA	(Number and Street, Ci 01720	ty, State, Zip Code)	Telephone Numb 978-263-8111	08059802
Address of Principal Business Operatio (if different from Executive Offices)	ns (Number and Street, Ci	ty, State, Zip Code)	Telephone Number	,
Brief Description of Business			<del>_</del>	
Corporation organized to deliver infrinstitutions.	astructure for the information disse	mination and proce	essing requirements of	Hou Bresesing
Type of Business Organization				Section
<ul> <li>☑ corporation</li> <li>☑ business trust</li> </ul>	<ul> <li>☐ limited partnership, already fo</li> <li>☐ limited partnership, to be form</li> </ul>	-	other (please specify):	SEP 102008
Actual or Estimated Date of Incorporat Jur sdiction of Incorporation or Organiz		1 0 rvice abbreviation f	Vear  5	D E 103

### GENERAL INSTRUCTIONS

# Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:

  - Each promoter of the issuer, if the issuer has been organized within the past five years;
    Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner
Fu I Name (Last name first, if indi-	vidual)				
Cramer, Robert					
Business or Residence Address	(Numbe	er and Street, City, State, 2	ip Code)		
Tervela Inc., 43 Nagog Park, Sui	te 201, Acton, M.	A 01720			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer		☐ General and/or Managing Partner
Full Name (Last name first, if indi-	vidual)				
Davoli, Robert					
Business or Residence Address	(Numb	er and Street, City, State, 7	Lip Code)		
Tervela Inc., 43 Nagog Park, Sui	ite 201, Acton, M.	A 01720			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Ful Name (Last name first, if indi	vidual)				
Lyuch, Chris					
Business or Residence Address	(Numbe	er and Street, City, State, 2	lip Code)	<u>-</u>	
Tervela Inc., 43 Nagog Park, Sui	ite 201, Acton, M	A 01720			
Check Boxtes) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indi	vidual)				
Patel, Ameet					
Business or Residence Address	(Numbe	er and Street, City, State, 7	(ip Code)		
Tervela Inc., 43 Nagog Park, Sui	ite 201, Acton, M	A 01720			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indi	vidual)				•
Perrone, Pete					
Business or Residence Address	(Numb	er and Street, City, State, 7	Lip Code)		
Tervela Inc., 43 Nagog Park, Sui	ite 201, Acton, M	A 01720			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indi	vidual)				
Thompson, Barry					
Business or Residence Address	(Numb	er and Street, City, State, 7	(ip Code)		
Tervela Inc., 43 Nagog Park, Sui	ite 201, Acton, M	A 01720			

# A. BASIC IDENTIFICATION DATA - CONTINUED

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
The Goldman Sachs Group, Inc					
Business or Residence Address		er and Street, City, State, Z	Lip Code)		· · · · · · · · · · · · · · · · · · ·
555 California Street, San Fran	cisco, CA 94104				
Check Box(es) that Apply:	□ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Sigma Partners 7, L.P.					
Business or Residence Address	(Numb	er and Street, City, State, Z	Cip Code)		
20 Custom House Street, Suite 8	330, Boston, MA	02110			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Sigma Associates 7, L.P.					
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)	· · · · · · · · · · · · · · · · · · ·	
20 Custom House Street, Suite 8	30, Boston, MA	02110			
Check Box(es) that Apply:	□ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Sigma Investors 7, L.P.					
Business or Residence Address	(Number	er and Street, City, State, 2	Lip Code)		.,
20 Custom House Street, Suite 8			- 13	- 13'	- C 1 1/
Check Box(es) that Apply:	□ Promoter	⊠ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
North Hill Ventures II, LP					
Business or Residence Address	(Numbe	er and Street, City, State, Z	Lip Code)		
Ten Post Office Square, H h Flo	or, Boston, MA-0	02109			
Check Box(es) that Apply:	□ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)		<del></del>		0.0
Tervela Acquisition, L.L.C.	,				
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		
18500 Edison Avenue, Chesterfi	ield, MO 63005				
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Tervela Acquisition II, L.L.C.					
Business or Residence Address	(Numbe	er and Street, City, State, Z	lip Code)		<u>=</u>
1850) Edison Avenue, Chesterfi	etd, MO 63005				

				B. INFO	ORMATIC	N ABOU	r OFFERI	NG			·-	
		· · · · ·				. "					res i	No
1. Has the issuer sold, or does the issuer intend to sell, to non accredited investors in this offering?										⊠		
			Ans	wer also in	Appendix,	Column 2,	if filing unc	ler ULOE.				
2. What is the	e minimum	investment	that will b	e accepted	from any in	dividual?					\$ <u>*</u>	
What is the minimum investment that will be accepted from any individual?  *Subject to the discretion of the Issuer								,	r'es l	No		
3. Does the o	effering per	mit joint ow	mership of	a single uni	it'?	**************	*************			····		⊠
4. Enter the iremuneration agent of a bropersons to be Full Name (L.	for solicita ker or deal listed are a	tion of pure er registered ssociated po	hasers in co d with the S ersons of su	onnection w EC and/or	vith sales of with a state	securities or states, I	in the offeri	ng. If a per of the brok	son to be li ter or deale	sted is an a	issociated than five (	person or
run Name (L	ast name n	ist, ii ilidivi	uuai j									
N/A												
Business or R	lesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
								<del> </del>				
Name of Asse	ociated Bro	ker or Deal	er									
Stares in Whi					Solicit Purc	hasers				_	All State:	e.
[AL]	All States" [AK]	or check in	aividuai Sti [AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]		[HI]	s [ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	INI	[TX]	ຸ່ບຖຸ່	įvrj	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indivi	idual)				· · <del>- · · · · · · · · · · · · · · · · ·</del>					,
***												
N/A Business or R	esidence A	ddroee (Nu	mber and S	treet City	State Zin C	'ode)		· · · · · · ·				
Dusiness of r	esidence A	uuress (riu	inoer and th	neet, eny,	otae, mp c	.040,						
		1		<del></del>		. <del> </del>						
Name of Ass	ociated Bro	ker or Deal	er									
States in Whi					Solicit Purc					П	All State	s
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	{CT}	[DE]	[DC]	[FL]	[GA]	[H1]	[ID]
[117]	IINI	IAI	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indiv	idual)									
N/A												
Business or R	lesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Ass	ociated Bro	ker or Deal	er				•				<del> </del>	
States in Whi	ch Person I	isted Has	Solicited or	Intends to	Solicit Purc	hasers		_ <del></del>				
	All States"										All State	S
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[111]	[110]
[117]	[111]	[1A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R1]	[SC]	[SD]	[TN]	[TX]	[ՄΤ]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

2	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, theck this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged				
	Type of Security	Aggregate Offering Pr	Amount Already Sold		
	Debt	\$	0	\$	0
	Equity		<u>0</u>		0
	□ Common □ Preferred				
	Convertible Securities (including warrants)	\$ <u>10,000,0</u>	<u>00</u>	\$ <u>5,70</u>	9,804.02
	Partnership Interests	\$	0	\$	0
	Other (Specify)	\$	0	<b>s</b>	0
	Total	\$_10,000,0	00	\$5,70	9,804,02
	Answer also in Appendix, Column 3, if filing under ULOE.		_		
(	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate he number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	i	Dolla	gregate r Amoun urchases
	Accredited Investors		7	\$ <u>5,70</u>	9,804.02
	Non-accredited Investors			\$	0
	Total (for filings under Rule 504 only)		<u>7</u>	\$ <u>5,70</u>	9,80 <u>4.02</u>
	Answer also in Appendix, Column 4, if fiting under ULOE.				
5	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of offering	Type of Security			r <mark>Amoun</mark> ofd
	Rule 505	•	<u>/A</u>	\$	
	Regulation A	N	<u>/A</u>	\$	<u>N/A</u>
	Rule 504	N	<u>/A</u>	<b>\$</b>	N/A
	Total	N	<u>/A</u>	<b>\$</b>	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	4		\$	
	Printing and Engraving Costs			\$	
	Legal Fees			\$_45	
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)			s	
	Total				.000.00

C. OFFERING PI	RICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF I	ROCEEDS	
I and total expenses furnished in res	regate offering price given in response to Part C - Question conse to Part C - Question 4.a. This difference is the r."			\$ <u>9,995,</u> 000
used for each of the purposes shown. If estimate and check the box to the left of	ed gross proceeds to the issuer used or proposed to be the amount for any purpose is not known, furnish an the estimate. The total of the payments listed must equal set forth in response to Part C - Question 4.b above.			
			Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees			<b>\$</b>	<b>-</b> \$
Purchase of real estate			\$	<b>-</b> \$
Purchase, rental or leasing and insta	dlation of machinery and equipment	0	\$	<b>-</b> \$
Construction or leasing of plant bui	Idings and facilities	. 🛭	\$	<b>-</b> \$
offering that may be used in exchar	luding the value of securities involved in this ge for the assets or securities of another	п	s	<b>□</b> \$
				- \$
				ax <u>\$39,995</u> ,000
• •			\$	
			<u> </u>	<u> </u>
			\$	<b>-</b> \$
Column Totals				ax \$ 9,995,000
Total Payments Listed (Column tot	als added)		Xa s_	9,995,000
	D. FEDERAL SIGNATURE			
following signature constitutes an under	e signed by the undersigned duly authorized person. If this naking by the issuer to furnish to the U.S. Securities and Excithe issuer to any non-accredited investor pursuant to paragraphs.	hange (	Commission, upo	e 505, the on written request
ssuer (Print or Type)	Signature /		Date	
Fervela Inc.	that after		August <u>31</u> , 2	2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
Stephen A. Johnson	Chief Financial Officer			
	II			



- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)